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Approved for use through 09/30/2000. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
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UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))	Attorney Docket No.	NC17368
	First Inventor or Application Identifier	CHASKAR, Hemant M.
	Title	METHOD AND APPARATUS FOR TRAFFIC SHAPING
	Express Mail Label No.	EL664600304US

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) 2. <input checked="" type="checkbox"/> Specification [Total Pages 16] - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 6] 4. Oath or Declaration [Total Pages <input]<br="" type="checkbox"/> a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 16 completed) i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).	5. <input type="checkbox"/> Microfiche Computer Program (Appendix) 6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies ACCOMPANYING APPLICATION PARTS 7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 8. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement of Power of Attorney (when there is an assignee) 9. <input type="checkbox"/> English Translation Document (if applicable) 10. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 2 Copies of IDS Citations 11. <input type="checkbox"/> Preliminary Amendment 12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 13. <input type="checkbox"/> * Small Entity Statement(s) filed in prior application, Status still proper and desired (PTO/SB/09-12) 14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 15. <input checked="" type="checkbox"/> Other: <u>Certificate of Mailing</u>

* NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).


16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment.

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: _____

Prior application information: Examiner _____ Group / Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

☒ Customer Number or Bar Code Label  or ☐ Correspondence address below
(Insert Customer Number or Bar Code label here)

Name	Robert C. Rolnik			26933
Address	PATENT TRADEMARK OFFICE			
City	State	Zip Code		
Country	Telephone	Fax		

Name (Print/Type)	Robert C. Rolnik	Registration No. (Attorney/Agent)	37,995
Signature	<u>Robert C. Rolnik</u>	Date	12/1/00

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

12/01/00
jc945 U.S. PTO

PTO/SB/17 (09-00)
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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$) 908.00

Complete if Known

Application Number	Unknown
Filing Date	11/30/2000
First Named Inventor	CHASKAR, Hemant M.
Examiner Name	Unknown
Group Art Unit	Unknown
Attorney Docket No.	NC17368

METHOD OF PAYMENT

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number: 50-0270

Deposit Account Name: NOKIA INC.

☐ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

☐ Applicant claims small entity status. See 37 CFR 1.27

2. ☐ Payment Enclosed:

☐ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION (continued)

3. ADDITIONAL FEES					Fee Description	Fee Paid
Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Code		
105	130	205	65		Surcharge - late filing fee or oath	
127	50	227	25		Surcharge - late provisional filing fee or cover sheet	
139	130	139	130		Non-English specification	
147	2,520	147	2,520		For filing a request for ex parte reexamination	
112	920*	112	920*		Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*		Requesting publication of SIR after Examiner action	
115	110	215	55		Extension for reply within first month	
116	390	216	195		Extension for reply within second month	
117	890	217	445		Extension for reply within third month	
118	1,390	218	695		Extension for reply within fourth month	
128	1,890	228	945		Extension for reply within fifth month	
119	310	219	155		Notice of Appeal	
120	310	220	155		Filing a brief in support of an appeal	
121	270	221	135		Request for oral hearing	
138	1,510	138	1,510		Petition to institute a public use proceeding	
140	110	240	55		Petition to revive - unavoidable	
141	1,240	241	620		Petition to revive - unintentional	
142	1,240	242	620		Utility issue fee (or reissue)	
143	440	243	220		Design issue fee	
144	600	244	300		Plant issue fee	
122	130	122	130		Petitions to the Commissioner	
123	50	123	50		Petitions related to provisional applications	
126	240	126	240		Submission of Information Disclosure Stmt	
581	40	581	40		Recording each patent assignment per property (times number of properties)	
146	710	246	355		Filing a submission after final rejection (37 CFR § 1.129(a))	
149	710	249	355		For each additional invention to be examined (37 CFR § 1.129(b))	
179	710	279	355		Request for Continued Examination (RCE)	
169	900	169	900		Request for expedited examination of a design application	
Other fee (specify) _____						
* Reduced by Basic Filing Fee Paid						
SUBTOTAL (3) (\$)						0

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
101	710	201	355			Utility filing fee	710.00
106	320	206	160			Design filing fee	
107	490	207	245			Plant filing fee	
108	710	208	355			Reissue filing fee	
114	150	214	75			Provisional filing fee	
SUBTOTAL (1) (\$)							710.00

2. EXTRA CLAIM FEES

Total Claims: 31
Independent Claims: 3
Multiple Dependent: 0

Extra Claims: 11
Fee from below: 18.00
Fee Paid: 198.00

Large Entity Small Entity
Fee Fee Fee Fee
Code (\$ Code (\$ Code (\$ Code (\$)
103 18 203 9 Claims in excess of 20
102 80 202 40 Independent claims in excess of 3
104 270 204 135 Multiple dependent claim, if not paid
109 80 209 40 ** Reissue independent claims over original patent
110 18 210 9 ** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

(198.00)

*or number previously paid, if greater; For Reissues, see above

SUBMITTED BY		Complete (if applicable)			
Name (Print/Type)	Robert C. Rolnik, Esq.	Registration No. (Attorney/Agent)	37,995	Telephone	(972) 894-5931
Signature	<i>Robert C. Rolnik</i>	Date	12/1/00		

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